City of Flagstaff - Flagstaff Aquaplex Community Enrichment Services Mailing: 211 W Aspen Ave, Flagstaff, AZ 86001

Physical: 1702 N Fourth St, Flagstaff, AZ 86004 Phone: (928) 213-2300 Fax: (928) 556-1226



## **Party Room Rental Application**

1. l,		reques	st permission	to RENT the Pa	arty Room (30	person max capacity)
(Name of	Individual)					
2. Date of Use:			D			
3. Time of Use (INCL	UDES SET-UP & CLEA	AN-UP TIME): F	rom	a.m. / p	.m. to	a.m. / p.m.
4. Anticipated attenda	ance: ADULTS	YOUTHS	(under 18)	Т	OTAL	
5. What time will gues	sts arrive?		What ti	me will guests le	eave?	
6. Will there be decor	ations? If y	yes, explain:				
9. Will there be food a	at the event?	If yes, who	at type?			
prior to scheduled use amenities may be fo	e without liability. Refun	ds will be mad or no notice d	e if cancella ue to mecha	tion by the City nical, chemical,	is necessary	th to cancel the scheduled event. Likewise, certain areas and/or ental issues (including lightening).
	stand that submittal of red payments made will				ervation. Only	y after all documents have been
Initial I have rand Guidelines" packe		erstand the info	ormation cor	tained in the Fl	agstaff Aquap	olex "Party Room Rental Policies
arise during, or be cau applicant further agree	used in any way by, such es that in consideration of s from any loss, claims,	h use or occupa of being permit	ancy of the fa ed to use th	acilities of the Ci e facilities, he/sh	ty of Flagstaff ne will save ar	ary, cost or expense that may and/or Recreation Section; the hold the said City of Flagstaff property that in any way may be
						damage/loss sustained by the facilities by the applicant.
Date Completed	Please Print Name	3		Signature		
Number and Street	(	City	State Zip	Primary	Phone	Alternate Phone
Name of Alternate Co	ntact Person For Event		<del></del> -	Phone		
Staff Name Printed	ff Name Printed Staff Sign					